PTO/SB/06 (08-03)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number 10 009 Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = X \$ OR INDEPENDENT CLAIMS minus 3 = X \$ OR (37 CFR 1.16(b)) MULTIPLE DEPENDENT CAIM PRESENT (37 CFR 1.16(d)) OR * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY (Column 1) CLAIMS PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-**EXTRA** TIONAL **AFTER PREVIOUSLY** TIONAL NDMENT FEE AMENDMENT PAID FOR FEE Total Minus 20 1 (37 CFR 1:16(c)) X \$ X \$ OR Independent (37 CFR 1.16(b)) Minus 2 ш OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR IATOT: TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST $\mathbf{\omega}$ PRESENT RATE ADDI-ADDI-REMAINING RATE NUMBER **EXTRA** TIONAL TIONAL **PREVIOUSLY** AFTER AMENDMENT PAID FOR FEE FEE 圙 Total (37 CFR 1.16(c)) Minus ENDM X \$ OR Minus x s OR X \$ Ž FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS PRESENT \circ REMAINING NUMBER RATE ADDI-RATE ADDI-FXTRA **PREVIOUSLY** TIONAL TIONAL **AFTER** ENDMENT AMENDMENT PAID FOR FEE FEE Minus Total (37 CFR 1.16(c)) OR Minus Independent (37 CFR 1.16(b)) OR Ş FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DQ,NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

plication or Docket Number

10/009123

CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			R THAN ENTITY
TOTAL CLAIMS								ATE	FEE	7	RATE	FEE
F	OR .		· NUMBER FILED		NUM	BER EXTRA	BAS	IC FEI	LJK	OR	BASIC FEE	
TO	OTAL CHARGE	ABLE CLAIMS	6 mi	nus 20=	•	×	9=	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	OR	X\$18=		
IN	DEPENDENT C	LAIMS	/ m	inus 3.=	*		X	42=		OR	X84=	
M	JLTIPLE DEPEI	NDENT CLAIM F	PRESENT				+1	40=	4000	OR	+280=	
*.11	f the difference	e in column 1 is	less than zero, enter "0" in column 2				TC	TAL	ULK	OR	TOTAL	
CLAIMS AS AMENDED - PART II									TP		OTHER	
		(Column 1)	(Column 2)			(Cotumn 3)	SN	ALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	R/	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 6	Minus	" 6	20	= X	X\$ 9=	9=		OR	X\$18=	
	Independent	. /	Minus	***	3	- (Y	X4	2=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENI	CLAIM		+1	10=.		OR	+280=	
								OTAL FEE		OR	TOTAL ADDIT, FEE	
	<u> </u>	(Column 1)		(Colur	nn 2)	(Column 3)	ADDI	. ree		4	ADDIT. YEL	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 5	Minus	* a	20	- ph.	X\$	9=		OR	X\$18=	
	independent	• /	Minus	چ ***	3	-(//	X4	2=		OR	X84=	·
	FIRST PRESE	NTATION OF MI	ULTIPLE DE	PENDENT	CLAIM	_/	+14	0=		OR	+280=	
								OTAL FEE	·	OR	TOTAL ADDIT, FEE	·
(Column 1) (Column 2) (Column 3)												
AMENDMENTC	Alaba a valo	CLAIMS REMAINING AFTER	West States in	HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 15	Minus	- a	0	-	X\$	9=		OR	X\$18=	
	Independent	. 2	Minus	خ	3	=4	X42	2=			X84=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							0=		OR		
÷ 16	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280= TOTAL	
* If the entry in column 1 is less than the entry in column 2, write '0' in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***OPTION ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
1	The *Highest Num	ber Previously Pale.	d For" (Total or	Independe	nt) is the	highest number	found in t	е арр	ropriate box	in colu	ภทก 1 .	